

**AFI****Angel Fund Investment Report****2013**

Calendar Year

Part 1 - Certified angel fund information			
Name of Angel Fund		Federal Employer Identification Number (FEIN)	
Address			
City		State	ZIP Code
<b>Signature</b> - I declare that this form is correct and complete to the best of my knowledge and belief.			
Signature			Date Signed
Printed Name of Person Signing Form		Telephone Number	E-mail Address
Part 2 - Enterprise information - On this report, only include new enterprises added to the angel fund's investment portfolio during the 2013 calendar year.			
Name of Enterprise		Address of Principal Place of Business	
If additional lines are needed, attach additional form(s).			

**Who must use this form**

Form AFI must be filed by each angel fund certified under N.D.C.C. § 57-38-01.26. The purpose of the form is to identify each new enterprise that the angel fund added to its investment portfolio during the calendar year.

Form AFI must be filed for each calendar year in which it was certified for any part of the year, including the year in which it ceases operations.

**Information disclosure** - The law authorizes the tax commissioner to disclose to North Dakota's Legislative Management the name of the angel fund and the information in Part 2 of this form.

**How to complete this form**

In **Part 1**, enter the name, address, and federal employer identification number (FEIN) that will be used on the angel fund's North Dakota income tax return. This form must be signed by a person authorized to act on behalf of the angel fund. A telephone number and, if available, an e-mail address are required in case the Office of State Tax Commissioner has any questions about the completion of the form.

In **Part 2**, enter the name and the address of the principal place of business of each enterprise within and without North Dakota that the angel fund added to its investment portfolio during the calendar year.

**When and where to file**

This form must be completed and filed on or before January 30, 2014. Mail the completed form to:

Office of State Tax Commissioner  
600 E. Boulevard Ave., Dept. 127  
Bismarck, ND 58505-0599

The angel fund should keep a copy of the completed form in its tax records.

**Where to get help****Phone**

701.328.1247

Speech or hearing impaired - call Relay ND at 1.800.366.6888

**E-mail**

Individualtax@nd.gov

**Web site**

www.nd.gov/tax